

S/N 09/217873

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Mark Rapaich
Serial No.: 09/217873
Filed: December 21, 1998
Title: DIGITAL YUV VIDEO EQUALIZATION AND GAMMA CORRECTION

Examiner: Paulos Natnael
Group Art Unit: 2614
Docket No: 450.221US1

PETITION FOR A THREE-MONTH EXTENSION OF TIME

RECEIVED

MS PETITION
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

MAY 07 2004

OFFICE OF PETITIONS

In accordance with the provision of 37 CFR § 1.136(a), it is respectfully requested that a three-month extension of time be granted in which to respond to the Office Action mailed July 1, 2003, said period of response being extended from October 1, 2003 to January 1, 2004.

Please charge Deposit Account No. 19-0743 in the amount of \$950.00 to cover the required extension fee. Please charge any additional fees or credit overpayment to deposit Account No. 19-0743.

Respectfully Submitted

MARK RAPAICH

By his Representatives,

SCHWEGMAN, LUNDBERG, WOESSNER & KLUTH, P.A.
P.O. Box 2938
Minneapolis, MN 55402
(612) 349-9581

Date:

Apr 27 '04

By:



John M. Dahl

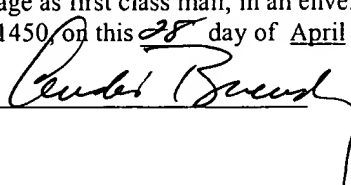
Reg. No: 44,639

CERTIFICATE UNDER 37 CFR § 1.8: The undersigned hereby certifies that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail, in an envelop addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 28 day of April 2004.

Name:

Candy Buending

Signature:



UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>5/19/04</u>		2 Serial/Patent # <u>09217873</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$
	Amendment			\$
✓	Extension of Time	# 35	5/3/04	\$ 950.00
	Notice of Appeal/Appeal			\$
	Petition			\$
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$
7 TOTAL AMOUNT OF REFUND			\$ 950.00	
8 TO BE REFUNDED BY:				
10 REASON:		Treasury Check		
	Overpayment	Credit Deposit A/C #:		
	Duplicate Payment	9 50--0439		
✓	No Fee Due (Explanation):			
EOT wasn't filed in a timely fashion.				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Liana Chase</u>		TITLE: <u>Paralegal</u>		
SIGNATURE: <u>[Signature]</u>		PHONE: <u>306-0482</u>		
OFFICE: <u>revisions</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: <u>[Signature]</u>		DATE: <u>5/20/04</u>		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: